PERSONNEL MANAGEMENT

# *Those Who Supervise Should Remember That*

# ALL WORKERS HAVE FEELINGS

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THE UNITED STATES has the greatest industrial setup in the world —the finest plants, the best equipment. But the plants and the equipment do not turn out production. It is the people in these plants, working together, who are producing.

Not all people of comparable ability — both physical and mental —produce comparable amounts of work. Leadership determines what will be accomplished. Good leadership is based on the recognition of the differences among individual persons, the ability to make the most of these different persons in teamwork, and the constant acceptance of the one like characteristic —*all workers have feelings.*

In industry there has been a great deal of attention given to financial incentives. Unfortunately not as much attention has been paid to non-financial incentives. But those companies which have tried to increase production through the arousing of greater interest and sense of participation in the plant's objectives have had splendid results.

In hospitals it would not be particularly easy to apply financial incentives, but a hospital would seem to have an even better opportunity to use non-financial incentives than would industry. The service angle of hospital work could be duplicated in few industrial situations. The accomplishments and the skills required to reach these accomplishments should also arouse pride.

This feeling of being engaged in important work does not, of course, always generate of itself. We have to let people in on what is going on, show them how one small job counts in the over-all objective. The girl who works in a hospital drug room may not realize that upon the carefulness and volume of her work depend the recovery and even the lives of the patients in the hospital. The man who runs a dish-washing machine, unless it is suggested to him, may not think that he has an important part in preventing the spread of disease.

It is important for everyone associated with a hospital staff to feel that it is his job to help people recover their health and wellbeing. It would be an easy parallel to paraphrase the story of the stonemason who said he was building a cathedral — not just laying stones. A hospital employee can have and will have the feeling that his own job saves lives if this feeling is intelligently fostered.

There are three other powerful incentives that any supervisor can use. How would it be to let each worker know how he is getting along? This means that you have to figure out just what you expect of him so you can let him know how he is measuring up. If you find that he is not quite up to standard, does it do any good just to say, "you aren't doing very well?" As the supervisor you have the responsibility for pointing out ways to improve.

This leads directly into a second important point, giving credit when due. If you have pointed out a needed improvement, should you let the worker wonder whether he is back in line? Is there any excuse for you not complimenting him on the improvement he has made? Remember that if a person has been below standard and has moved up to what is nearly average work. that still is a reason for giving credit. And don't forget to tell him while it's hot.

Too often supervisors operate on the basis of, "he'll know it's all right unless I tell him it isn't." Don't wait until you have to bawl him out again and then either say, "by the way, that one thing was good, why didn't you do it all the time?" or ignore it all together.

The third point I would suggest is to make the best use of each person's ability. This is particularly important in wartime. Look around your place and find out what ability is not now being used — really make an inventory of the skills and knowledge of the people whose work you direct. If you do this you will not be open to the charge of standing in a man's way. Do something about using those abilities that you have found lving unused.

Another important thing for us to remember in all of our dealings with people (and people in hospitals are people) is to keep workers informed about the changes that affect them. Let's give them the reasons why so that they will accept the change and go along with it. Changes are generally made because they are necessary or logical. Necessary changes do have to be explained, but sometimes logical changes do not have to be made, and if we consider the reactions of the people affected we may not make them.

This reminds me of a change which was made without consulting the workers involved or even giving them the reasons for it. This

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took place in a well-run factory. The company rule required that the girls in a certain department wear uniforms. The girls bought their own uniforms but the company took care of laundering them.

The style of uniform which had been worn for a long time was a sort of bungalow apron which had a rather large square neck and which was made in small, medium, and large sizes only. None of the aprons fitted very well, and everyone was used to seeing the girls with their bulky aprons tied in around the waist.

Someone who was hoping to please the girls thought it would be a fine idea to get new uniforms. A lot of styles were considered and a really nice looking uniform was chosen. It was obtainable in all regular sizes. The uniform was fitted at the waist and had a neat tailored collar at the high neck. In order to get things off to the right start, the company purchased two uniforms for each girl. Additional uniforms were then to be bought by the girls.

The change almost wrecked the whole department. Because of the product the temperature in this department was rather low. All of the girls were in the habit of putting on their bungalow aprons over their own street clothes. They could not do this with the new uniforms. The tight-fitting collar meant that a fresh uniform had to be worn each day.

One might think that the company's arrangement to take care of the laundry would make up for this, but a fresh uniform daily meant that each girl had to own double the number of uniforms. The new type uniform also "mussed your hair when you put it on," the girls said. And many of them just did not get started to work on time because they had to stop to comb their hair again.

This shows that even when we think we're considering workers' feelings we can do a pretty poor job. It is not enough just to realize that workers have feelings—we must find out what they are.

How easy it is for us as supervisors to have clearly in mind some way of improving the method by which the work can be done and then assuming that the employees involved will feel about the change just as we do. Take for example the office supervisor who was anxious to have all his girls just as comfortable as possible when at their desks and at office appliances. He was sure that a new type of chair would really reduce fatigue. But, in order to be doubly sure, he had a sample chair delivered at home. Mr. and Mrs. Supervisor tried it out and were most enthusiastic about its advantages. They "knew" the girls in the office would like it.

Being of a scientific turn of mind, this Mr. Supervisor decided that he would determine how much effect the new type chair had on the amount of work a girl could do comfortably in a day. It all seemed logical enough. He selected his most efficient girl to use the new chair. Certainly if it helped the best girl it would prove helpful to the others. In order not to prejudice or influence the test in any way, he decided not to tell the girl any details about the experiment, since that might influence the results. So the new chair was substituted for the old one and Mr. Supervisor watched patiently for the improved results.

Much to his surprise, the quality and quantity of the work was less satisfactory than before. He couldn't understand it. After some days the girl was evidently so unhappy that even at the risk of ruining the "scientific" experiment he broke down and talked it over with her.

She couldn't understand why, of all the girls in the office, he should pick on her and force her to use this new contraption! None of the other girls were imposed on in the same way. She had been in this office longer than any of the others. Furthermore, her chair was the one she had used for the past three years. She liked it, and it had her name on it, and none of the other girls ever touched it.

That supervisor learned quite definitely that feelings do affect production. He learned, too, that the logic of efficiency does not carry over into how we think and feel about things that are important to us as individuals.

When we get to the point of considering that workers have feelings, we must remember that if someone "feels" it's so, we have to consider it as a factor in the situation whether it is a fact or not. If you announce "it's too hot in this room," does it do any good to have someone say "according to the thermometer it is only 68."

I remember something that happened in a fair sized laboratory. Now there were plenty of things about the room that you could object to. There were all kinds of odors and sometimes the supervisor wondered how people put up with it. But it was an old working group. They had been together a long time.

Then a new girl was added. When early summer came, a lot of flowers appeared in the laboratory. The people who grew flowers brought them for themselves and their friends.

After a few days the new girl announced that she had rose fever and that all of these flowers were very annoying to her. For a few days the supervisor was quite baffled. She did not want to stop the fun that everybody in the old group had been having. They were used to bringing flowers, they enjoyed having them around and they liked to show off their own best samples—but the new girl was needed and the supervisor couldn't take a chance on her leaving.

Finally he hit upon an idea. He asked one of the men who was a particularly good gardener if he

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**SECOND OF A SERIES**

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didn't think it would be a good idea to bring some flowers for the new girl. The man was always glad to give flowers away, and he brought some for the girl. Strangely enough, that was the last that was heard of rose fever.

An assistant of mine tells a good story on herself. Once she signed up for a course of swimming lessons and had a very quick physical examination at the pool. The doctor said to her, "Have you ever had any trouble with your right ear?" She said "no," but immediately began to imagine things about her right ear.

The next day at the office, looking at her phone on the left side of her desk, she wondered, "Why is my phone on the left side of my desk? I had the phone men put it there myself. Why, it's because I'm deaf in my right ear." Of course—since she was deaf in her right ear—she began to turn her head when people spoke to her. Shortly, she had her desk turned, all because—she was deaf in her right ear.

I hate to think what would have happened if her supervisor had told her that it was all nonsense, that she wasn't deaf in her right ear! Telling someone she isn't what she feels she is never is convincing.

Fortunately for her own feelings, and probably for the people around her, she became sufficiently exercised to go to an ear doctor. When she had a hearing test it was found that she had remarkably acute hearing in both ears; in fact, there was a slight difference in favor of the right ear. Then, to her chagrin, she remembered that the phone had been placed on the left of her desk in order to leave her right hand free for writing.

Because there are people who have had special training and make their living as interviewers, it's easy to think that finding out what people think and feel is an art which someone who is not a specialist just doesn't understand.

There *is* an art in interviewing, but it's something anyone can learn and use. Here are some simple rules anyone can follow:

*Don't argue.* If you are trying to find out how someone feels about something, don't start in by telling him—or her—that he's all wrong.

*Encourage him to talk about what is important to him.* Some people need help in expressing themselves. Others want to make sure you are really interested before they do much talking.

*Don't interrupt.* If you are telling a story and someone cuts in on you, do you feel like continuing?

*Don't jump at conclusions.* Not everyone *means* the same things as you do when you speak the same words. Be careful you don't twist the meaning.

*Don't do all the talking yourself.* If you want to find out how someone feels, don't spend much time talking about how you feel.

*Listen.* Sympathetic interest is the most important rule of all—many people will talk if just given a chance. And many problems are solved by no other action than good listening.

The administrator, the supervisor—anyone who depends for results on the people whose work he directs—will get big returns by remembering that workers have feelings.

***AN ECHO OF THE PAST: 1907***

# Reading, Cooking, Manicuring

## *Once Were Valued Nursing Techniques*

"To oppose the raising of the standard of training and to raise the standard of requirements is unwise, not only for the hospital, but for the patients. I have found that the course is not near long enough, and it would take about five years to meet all the requirements made by patients.

"For instance, nurses in my town are expected to be social entertainers. The nurse who can hardly read English would not satisfy the majority of people in our town, because they expect the nurse to be able to read aloud melodiously and acceptably to patients. They must know how to pronounce their words clearly and distinctly and to read with a certain amount of melody.

"The nurses in my town are expected to write polite notes. The town is not a very large one. The population is about 60,000, and the people in the town are always extremely kind to their friends. They send masses of flowers, and the nurses are expected to send polite notes of acknowledgment. Sometimes that is considered more important than to be able to give a hypodermic injection to the satisfaction of the surgeon.

"They are also expected to be cooks, and I am sure instruction in cooking so as to satisfy the patient and the patient's friends will be suggested. It has been a serious complaint, at our trustees' meetings, that nurses do not know how to cook. Over and over again my nurses go out and the doctor will say: 'Well, what did you get; did you get this in the hospital? Well, if you got that in the hospital, the diet will be all right.'

"One of my directors has insisted on having an additional course so that the nurses may learn how to do housekeeping, because on three occasions the servants departed in a body and the nurses were expected to do the cooking and housekeeping. They are expected to know a great deal about drugs; they are expected to know much that nurses 20 years ago never knew anything about.

"The wife of a medical man whom you all know, and who is at the head of a training school of several hospitals, argued for half an hour with us because we did not have manicuring in the curriculum. She said manicuring was very necessary, particularly for nervous patients. She also thought that hair dressing ought to be a part of the nurses' instructions.

"Really, it goes on from year to year and it does not seem that it will ever reach the point of the expectation of the patient in private nursing." — Miss Annabel L. Stewart, South Framingham (Mass.) Hospital, as reported in *Transactions of the American Hospital Association;* ninth annual conference, Chicago, (1907).